



# BUSINESS LICENSE COMMISSION

## COUNTY OF LOS ANGELES

374 KENNETH HAHN HALL OF ADMINISTRATION

500 WEST TEMPLE STREET

LOS ANGELES, CA 90012

(213) 974-7691

[www.board.co.la.ca.us/blc](http://www.board.co.la.ca.us/blc)



### MEMBERS

STEVEN AFRIAT

*PRESIDENT*

RENÉE CAMPBELL

*VICE-PRESIDENT*

SARA VASQUEZ

*SECRETARY*

JAMES BARGER

*COMMISSIONER*

SHAN LEE

*COMMISSIONER*

September 25, 2014

Yvette Marie Romo  
Rowland High School Raider  
Education Foundation  
2000 S. Otterbein Ave.  
Rowland Heights, CA 91748

### **HEARING ON APPLICATION FOR BINGO OPERATOR** **BUSINESS LICENSE ID #139662**

Dear Applicant:

The Business License Commission will hold a hearing on the above matter on **Wednesday, October 8, 2014 at 9:00 a.m.** in Room 374-A, 500 West Temple Street, Los Angeles, CA 90012. Your presence is requested at this hearing. If you are unable to attend you may authorize a representative to appear on your behalf. The representative must present signed and duly notarized letter giving authorization and the reasons you are unable to appear.

### **RIGHT TO REPRESENTATION / FOREIGN LANGUAGE SPEAKERS**

**You have the right to be represented at this hearing by an attorney or other individual of your choosing and at your own cost.** In the absence of a representative, you must represent yourself and the hearing will proceed as scheduled.

If you require a translator, you must arrange at your own cost to have present at the hearing either **a professional/certified interpreter or other person who is fluent in both English and your native language.** If you are unable to locate an interpreter, please contact our office and you will be provided a list of interpreting services.

Parking is available at your cost; a map is enclosed for your convenience. **Please note proceedings begin promptly at 9:00 a.m. The Business License Commission reserves the right to reschedule your hearing to a later date for failure to timely appear.**

Sincerely,

STEVEN AFRIAT  
President

Lupe Duron  
Commission Staff

NOTICE TO PRINTER  
STATE LAW REQUIRES THAT THIS  
LEGAL ADVERTISEMENT SHALL BE SET  
IN TYPE NOT SMALLER THAN NONPAREIL ( 6 PT. )

CUSTOMER CODE : Z 91085

NEWSPAPER : .....SAN GABRIEL VALLEY TRIBUNE

PUBLISH 3 TIMES

1<sup>ST</sup> PUBLISHING DATE:.....09/04/2014  
2<sup>ND</sup> PUBLISHING DATE:.....09/11/2014  
3<sup>RD</sup> PUBLISHING DATE:.....09/18/2014

REPRINTS ORDERED: NONE

NOTICE OF HEARING TO CONDUCT

BINGO OPERATOR

NOTICE IS HEREBY GIVEN THAT APPLICATION HAS BEEN  
MADE TO THE LOS ANGELES COUNTY BUSINESS LICENSE  
COMMISSION TO CONDUCT

ADVANCE PROOF REQUESTED

ADDRESS OF PREMISES:.....2000 S. OTTERBEIN AVE  
ROWLAND HEIGHTS, CA 91748  
NAME OF APPLICANT:.....ROWLAND HIGH SCHOOL RAIDER  
EDUCATION FOUNDATION /  
YVETTE ROMO  
DATE OF HEARING:.....10/08/2014  
TIME OF HEARING:.....09:00 A.M.

"ANY PERSON HAVING OBJECTIONS TO THE GRANTING OF  
THE LICENSE MAY, AT ANY TIME PRIOR TO THE DATE ABOVE NAMED, FILE WITH THE BUSINESS  
LICENSE COMMISSION HIS OBJECTIONS IN WRITING GIVING HIS REASONS THEREFOR, AND HE  
MAY APPEAR AT THE TIME AND PLACE OF THE HEARING AND BE HEARD RELATIVE THERETO"

OFFICE OF THE COMMISSION:

BUSINESS LICENSE COMMISSION  
500 W. TEMPLE STREET, RM 374  
LOS ANGELES, CA 90012

RETURN TO:

LOS ANGELES COUNTY TAX COLLECTOR  
BUSINESS LICENSE SECTION  
225 N. HILL STREET RM. 109  
LOS ANGELES, CA 90012



**COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90012



**BUSINESS LICENSE APPLICATION REFERRAL  
SUMMARY SHEET**

KIND OF BUSINESS: **BINGO OPERATOR**

ADDRESS OF BUSINESS: **2000 S OTTERBEIN AVE., ROWLAND HEIGHTS, CA 91748**

TELEPHONE: **(626) 965-3448**

OWNER OF BUSINESS: **YVETTE M ROMO**

CAL. DR. LIC# :

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: **ROWLAND HIGH SCHOOL RAIDER EDU**

MAILING ADDRESS: **2000 S OTTERBEIN AVE., ROWLAND HEIGHTS, CA 91748**

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: **NEW LICENSE**

	<u>APPROVED</u>	<u>DATE</u>	<u>SIGNATURE</u>
<input type="checkbox"/> 1. Animal Care & Control			
<input checked="" type="checkbox"/> 2. Risk Management	YES	08/20/14	tchen
<input checked="" type="checkbox"/> 3. Building & Safety	YES	10/05/12	dmiles
<input checked="" type="checkbox"/> 4. Fire Department	YES	08/29/12	dmiles
<input type="checkbox"/> 5. Public Health			
<input type="checkbox"/> 6. Treasurer & Tax Collector			
<input checked="" type="checkbox"/> 7. Business License Commission			
<input checked="" type="checkbox"/> 8. Sheriff Department	YES	04/30/14	tchen
<input checked="" type="checkbox"/> 9. Regional Planning Commission	YES	08/17/12	dmiles
<input type="checkbox"/> 10. Weights and Measures			
<input checked="" type="checkbox"/> 11. Publishing	YES	08/28/14	tchen
<input type="checkbox"/> 12. Public Works - EPD			
<input checked="" type="checkbox"/> 13. Sheriff Fingerprint	YES	04/30/14	tchen

Conditions:



Los Angeles County Treasurer and Tax Collector  
Application for Business License



Please note: Business License fees are NOT refundable

Fee: \$ \_\_\_\_\_

ID # 139662

BUSINESS INFORMATION

Type of Business: <u>Bingo Operator</u>	Address of Business: <u>2000 S. OTTERBEIN Ave</u> Rowland Hts. CA 91748	
DBA (Business Name): <u>Rowland High School Raider Education Foundation</u>	Business Telephone: <u>(626) 965-3448</u>	
	Mailing Address: <u>2000 S. Otterbein Ave</u> Rowland Hts. CA 91748	
Sellers Permit # (State Board of Equalization):		
Business Ownership Structure: <u>Single Owner</u> <input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> Corporation <input checked="" type="checkbox"/>		
If LLC or Corporation, the Information below is required:		
Date of Incorporation:	Incorporated in the State of:	
Exact Corporate Name:		
Names of Officers	Addresses	Titles
<u>Robert Padilla</u>	<u>2000 S. OTTERBEIN Ave</u>	<u>President</u>
<u>Joanne Itagaki</u>	<u>1</u>	<u>Vice President</u>
<u>Angelena Moore</u>	<u>1</u>	<u>Treasurer</u>
<u>Yvette Romo</u>	<u>1</u>	<u>Secretary</u>

APPLICANT INFORMATION

Applicant's Full Name: <u>Yvette Marie Romo</u>		
Home Address: _____		
Home Telephone: _____	Cell Phone: _____	Email address: <u>romoi1@yahoo.com</u>
Social Security #: _____	Date of Birth: <u>1/1/1978</u>	Place of Birth: _____
Driver's License or State ID#: _____		Expiration Date: <u>1/1/2012</u>
Male <input type="checkbox"/> Female <input type="checkbox"/>	Height: _____	Weight: _____
Hair Color: _____		Eye Color: _____

The information contained herein is true and correct to the best of my knowledge and belief. As a condition of the issuance of the license applied for, I agree to submit any additional information that may be required, to conduct all phases of this business in accordance with regulations established for such business and to maintain all trucks and/or equipment that may be used in connection therewith in conformance with all applicable laws, ordinances and regulations.

Date: 8/16/12 Applicant's Signature: [Signature]

Application taken by: Disla Date: 8/16/12



COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970



BUSINESS LICENSE  
APPLICATION REFERRAL

KIND OF BUSINESS: BINGO OPERATOR

ADDRESS OF BUSINESS: 2000 S OTTERBEIN AVE., ROWLAND HEIGHTS, CA 91748

TELEPHONE: (626) 965-3448

OWNER OF BUSINESS: YVETTE M ROMO

CAL. DR. LIC.#:

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: ROWLAND HIGH SCHOOL RAIDER EDU

MAILING ADDRESS: 2000 S OTTERBEIN AVE., ROWLAND HEIGHTS, CA 91748

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

RISK MANAGEMENT  
LA COUNTY

☒ APPROVAL

☐ DENIAL

RECOMMENDATION: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SIGNATURE: Kerry Furse

DATE: 9/3/2014

BASIC LICENSE NO. 3802

DATE 09/02/14

IDENTIFICATION NUMBER 139662

**COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

**BUSINESS LICENSE  
APPLICATION REFERRAL**

KIND OF BUSINESS: **BINGO OPERATOR**

ADDRESS OF BUSINESS: **2000 S OTTERBEIN AVE., ROWLAND HEIGHTS, CA 91748**

TELEPHONE: **(626) 965-3448**

OWNER OF BUSINESS: **YVETTE M ROMO**

CAL. DR. LIC.#:

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: **ROWLAND HIGH SCHOOL RAIDER EDU**

MAILING ADDRESS: **2000 S OTTERBEIN AVE., ROWLAND HEIGHTS, CA 91748**

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: **NEW LICENSE**

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**BUILDING & SAFETY  
LA COUNTY**

☒ **APPROVAL**

☐ **DENIAL**

RECOMMENDATION: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SIGNATURE: Art Osillo

DATE: 9/28/12

BASIC LICENSE NO. 3802

DATE 09/26/12

IDENTIFICATION NUMBER 139662

**COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR**

225 N. Hill Street, Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

**BUSINESS LICENSE  
APPLICATION REFERRAL**

KIND OF BUSINESS: BINGO OPERATOR

ADDRESS OF BUSINESS: 2000 S OTTERBEIN AVE., ROWLAND HEIGHTS, CA 91748

TELEPHONE: (626) 965-3448

LACO

OWNER OF BUSINESS: YVETTE M. LOMO

CAL. DR. LIC. #

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: ROWLAND HIGH SCHOOL RAIDER EDU

MAILING ADDRESS: 2000 S OTTERBEIN AVE., ROWLAND HEIGHTS, CA 91748

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

**FIRE DEPARTMENT  
LA COUNTY**☒ APPROVAL☐ DENIAL

RECOMMENDATION:

FIRE EXT. SERVICE ANNEX

SIGNATURE:

DATE:

8/27/12

BASIC LICENSE NO. 3802

DATE 08/17/12

139662

COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR  
BUSINESS LICENSE SECTION  
REVENUE & ENFORCEMENT DIVISION

TO: DEPARTMENT OF REGIONAL PLANNING  
320 W. TEMPLE STREET, 13<sup>TH</sup> FLOOR, ROOM 1360  
LOS ANGELES, CALIFORNIA 90012

FROM: BUSINESS LICENSE SECTION  
225 NORTH HILL STREET ROOM 109  
LOS ANGELES, CALIFORNIA 90012

DEPARTMENT OF REGIONAL PLANNING FEE: \$354.00

TELEPHONE: (213) 974-2011  
FAX: (213) 633-5467

DATE: Aug 16, 2012

ID#: \_\_\_\_\_

REGIONAL PLANNING ID#: \_\_\_\_\_

TYPE OF BUSINESS AND CODE: Bingo Operator

BUSINESS ADDRESS: 2000 S. Otterbein Ave

CITY: Powland Heights, CA 91748 APN#: \_\_\_\_\_

NAME OF OWNER: Yvette Romo PHONE: \_\_\_\_\_

D.B.A./NAME OF BUSINESS: Powland High School Raider CELL PHONE#: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

e-mail ADDRESS: \_\_\_\_\_

To be completed by Regional Planning


EXISTING USE: New ( ) Renewal ( )

PROJECT: \_\_\_\_\_

CELL PHONE #: \_\_\_\_\_

USE PERMITTED IN ZONE: \_\_\_\_\_ USE NOT PERMITTED IN ZONE: \_\_\_\_\_

APPROVED: \_\_\_\_\_ DENIED: \_\_\_\_\_

Regional Planning does not approve  
any use/~~to~~ change proposed on  
a property owned by school  
district. 

— Soyeon Choi  
8/16/12



ALICE W. WONG  
Senior Regional Planning Assistant

County of Los Angeles  
Department of Regional Planning  
320 West Temple Street  
Los Angeles, CA 90012

(213) 974-6411  
Fax: (213) 974-6384  
TDD: (213) 617-2292  
awong@planning.lacounty.gov

DATE

THIS IS ONLY A BUSINESS LICENSE REFERRAL AND AN APPROVAL DOES NOT CONSTITUTE A BUSINESS LICENSE. YOU MUST RETURN REFERRAL TO THE TREASURER AND TAX COLLECTOR TO CONTINUE THE BUSINESS LICENSE APPLICATION PROCESS.





COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970



BUSINESS LICENSE  
APPLICATION REFERRAL

914-00579

KIND OF BUSINESS: BINGO OPERATOR

ADDRESS OF BUSINESS: 2000 S OTTERBEIN AVE., ROWLAND HEIGHTS, CA 91748

TELEPHONE: (626) 965-3448

OWNER OF BUSINESS: YVETTE M ROMO

CAL. DR. LIC.#:

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: ROWLAND HIGH SCHOOL RAIDER EDU

MAILING ADDRESS: 2000 S OTTERBEIN AVE., ROWLAND HEIGHTS, CA 91748

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

SHERIFF FINGERPRINT

LA COUNTY

☒ APPROVAL

☐ DENIAL

RECOMMENDATION:

Approved

SIGNATURE:

DATE:

4/17/14

BASIC LICENSE NO. 3802

DATE 04/03/14

IDENTIFICATION NUMBER 139662

PK